

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
402434501

Date Received:
06/30/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10651
Name of Operator: VERDAD RESOURCES LLC
Address: 1125 17TH STREET SUITE 550
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Michael Cugnetti</u>	<u>7208456901</u>	<u>mcugnetti@verdadresources.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 689501031
Inspection Date: 04/29/2020 FIR Submit Date: 05/08/2020 FIR Status: _____

Inspected Operator Information:

Company Name: VERDAD RESOURCES LLC Company Number: 10651
Address: 5950 CEDAR SPRINGS ROAD
City: DALLAS State: TX Zip: 75235

LOCATION - Location ID: 320117

Location Name: GREAT WESTERN RAI Number: 1 (1-8) County: ADAMS
Qtrqr: NENW Sec: 8 Twp: 1S Range: 65W Meridian: 6
Latitude: 39.984179 Longitude: -104.691309

FACILITY - API Number: 05-001-00 Facility ID: 202712

Facility Name: RAINBOW Number: 1
Qtrqr: NENW Sec: 8 Twp: 1S Range: 65W Meridian: 6
Latitude: 39.984179 Longitude: -104.691309

CORRECTIVE ACTIIONS:

1 CA# 138851

Corrective Action: Submit a Supplemental Form 19 including a closure request and supporting. If closure of this spill cannot be completed by corrective action deadline then a Form 27 Site Investigation and Remediation Workplan shall be created for this spill. Date: 06/30/2020

Response: CA COMPLETED Date of Completion: 06/30/2020

Operator Comment: A Form 27 Site Investigation and Remediation Workplan has been created for this spill. Document # 402434356.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Michael Cugnetti

Signed: _____

Title: Director of EHS&R

Date: 6/30/2020 11:32:28 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files